

In re: _____

Case No. _____

Chapter _____

Debtor(s) _____

Application for Payment of Unclaimed Funds

It appearing that a dividend check in the amount of \$_____ was issued by the trustee to _____, creditor in the above-referenced case.

It also appearing that said check was not negotiated by said payee, and the trustee, pursuant to 11 U.S.C. §347(a), delivered the unclaimed funds to the Clerk, U.S. Bankruptcy Court, District of Vermont. These funds are currently being held in the United States Treasury.

If applicant is a funds locator, this application includes a Power of Attorney authorizing the undersigned, _____ Attorney in Fact, to petition the Court on behalf of the claimant for the release of these funds. This application includes an Affidavit of the undersigned that he/she has made all reasonable efforts to believe that the person or entity claiming right to these funds is the legal owner of such funds.

The U.S. Attorney for the District of Vermont has been provided a copy of this application allowing 20 days from the date of service to file an objection to payment of the unclaimed funds.

Therefore, an application is made for an order directing the Clerk of Court to pay said unclaimed funds to the order of _____, applicant, and to _____, joint applicant, if the application is made jointly by a funds locator, and mail said check to the following address:

_____.

Dated: _____

Applicant or Attorney in Fact

Subscribed and Sworn Before Me this _____ day of _____, 20____.

Notary Public in and for the State of _____

My commission expires: _____

Affidavit of Funds Locator

I, _____, have obtained the consent of the claimant to make application for the unclaimed funds as provided in this application. I have made all reasonable efforts required to believe to the best of my knowledge that _____ is legally entitled to the unclaimed funds referenced in this application. I am familiar with the State of Vermont requirements for acting in the capacity of Attorney in Fact.

Dated: _____

Attorney in Fact

Subscribed and Sworn Before Me this _____ day of _____, 20____.

Notary Public in and for the State of _____

My commission expires: _____

Affidavit of Claimant

I, _____, do hereby state that I am the claimant to the unclaimed funds referenced in this application and that I am, to the best of my knowledge, the legal owner of these funds. My mailing address and phone number are:

Address: _____ Phone No.: _____

My social security number is _____. If claimant is a business entity, the federal tax I.D. number of the business entity is _____.

Dated: _____

Claimant (or representative of Business Entity)

Subscribed and Sworn Before Me this _____ day of _____, 20____.

Notary Public in and for the State of _____

My commission expires: _____

In re:

Case No. _____

Chapter _____

Debtor(s)

Certificate of Service

I, _____, hereby certify that on _____, 20____, I
forwarded the Application for Payment of Unclaimed Funds via
_____, to the Office of the U.S. Attorney at P.O. Box 570, Burlington,
Vermont, 05402-0570.

Dated: _____

Claimant (or Attorney in Fact)

In re:

Case No. _____

Chapter _____

Debtor(s)

ORDER FOR PAYMENT OF UNCLAIMED FUNDS

IT APPEARING that the funds from the uncashed dividend check totaling \$_____, payable to _____, a creditor in this case, was deposited in the registry account of the Clerk, United States Treasury, and that the proper recipient for said funds has now been located.

IT IS THEREFORE ORDERED that the application is granted and that the Clerk, U.S.

Bankruptcy Court for the District of Vermont is ordered to pay these unclaimed funds in the amount of \$_____ to the order of:

[Name, Mailing Address of Payee/Joint Payees]

and mail the check to:

[Address to Which Check is to be Mailed]

Rutland, Vermont

[DATE]

Colleen A. Brown
United States Bankruptcy Judge